PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			68					RATE	FEE]	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		В	SASIC FEE	375.00	OR	BASIC FEE	750.00	
TOTAL CHARGEABLE CLAIMS			68 minus 20=		* 48			X\$ 9=		OR	X\$18=	864	
INDEPENDENT CLAIMS			6 m	inus 3 =	* 3			X42=		OR	X84=	252	
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT	· · · · · · · · · · · · · · · · · · ·				+140=		OR	+280=		
* If the difference in column 1 is less than zero,					"0" in (column 2	L	TOTAL		OR	TOTAL	18 be	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column						(Calumn 2)		SMALL E	=NTITY	OR	OTHER SMALL		
		(Column 1)		HIGH			OWALL		OMALL				
NDMENT A		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AMENDN	Independent	* .	Minus	***		=		X42=		OR	X84=		
L	FIRST PRESE	NTATION OF M	ULTIPLE DE	EPENDENT CLAIM				+140=		OR	+280=		
								TOTAL		∩B	TOTAL		
		Αl	ODIT. FEE			ADDIT. FEE							
		(Column 1)		(Colur		(Column 3)	_						
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	•	RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X42=		OR	X84=		
	(Column 1) (Column 2) (Column 3)									OR	+280=		
										OR I	TOTAL ADDIT. FEE		
											ADDII. 1 E.E.		
		CLAIMS		HIGH		(Coldinii o)	-			1			
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X42=			X84=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							Λ 76 -		OR	,		
*	If the entry in colu	mn 1 is less than t	he entry in col	umn 2 write	 a "O" in oo	olumn 3		+140=		OR	+280=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											TOTAL ADDIT. FEE		
		mber Previously Pa ber Previously Pa					foun	d in the and	rooriate ho	v in co	lumn 1		